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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-876)

SERIAL NO. **09/890-372**  
FILING DATE **10/1/75**  
APPLICANT(S)

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		CLAIMS
	IND.	DER.	IND.	DER.	IND.	DER.	
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TOTAL IND.	3						
TOTAL DER.	37						
TOTAL CLAIMS	40						

  

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		CLAIMS
	IND.	DER.	IND.	DER.	IND.	DER.	
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TOTAL IND.							
TOTAL DER.							
TOTAL CLAIMS							

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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PTO/SB/07 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/07)							Application Number <b>09/890-037</b>		Filing Date <b>4/08/02</b>				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend	*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep							Total Indep						
Total Depend							Total Depend						
Total Claims							Total Claims						

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